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March 12, 2004

TO:

Each Supervisor

FROM:

Thomas L. Gartfiwaite, MD

Director and Chief Medical Officer

COMMITTEE OF THE WHOLE SUBJECT: HEALTH DEPARTMENT BUDGET

This is to provide an update on the Department of Health Services' (DHS) fiscal outlook and the status of activities related to the implementation of Scenario III of the Department's system redesign plan.

DHS Fiscal Outlook

The attached schedule provides an update of the Department's Fiscal Outlook since the last Health Department Budget Committee of the Whole of on January 27, 2004. The Department's forecast cumulative shortfall through Fiscal Year 2007-08 has increased from \$655.3 million to \$740.1 million.

Attachments A and B detail the changes in the Department's fiscal forecast. The majority of the increase in the forecast shortfall can be attributed to revised assumptions from the Chief Administrative Office related to an anticipated reduction in vehicle licensing fees, a revenue loss of \$72.5 million over the five year period, and increases in employee benefit costs of \$39.2 million over the forecast period.

The Department's forecast also is affected by a number of areas in which expenditures were lower than anticipated. In particular, savings of \$11 million are anticipated related to funding allocated to meet the AB 394 nurse staffing ratios. The facilities have been unable to recruit nurses at the level originally anticipated, which

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has resulted in savings. The Department continues to aggressively recruit nursing personnel. Additionally, in order to obtain sufficient numbers of nursing staff to comply with the AB 394 requirements, the Department is utilizing registry nursing staff, and as this cost increases, the funding allocated to hire DHS nursing personnel may be transferred from the hospitals' salary budgets to the services and supplies budget to offset the cost of these contract services.

There also continue to be a number of significant events that could transpire that would substantially alter the fiscal outlook for the worse. As the Department has reported previously, should DHS be unable to close or transfer operation of Rancho Los Amigos National Rehabilitation Center or close 100 inpatient beds at LAC+USC Medical Center by June 30, 2005; fail to extend cost-based reimbursement for the Department's clinics and hospital outpatient areas beyond the June 30, 2005 expiration of the current 1115 Waiver or obtain Federally Qualified Health Center (FQHC) status; and/or, the federal government re-base the Selective Provider Contracting Program (SPCP) waiver, the cumulative shortfall could grow to \$1.60 billion in Fiscal Year 2007-08.

Additionally, as I have previously reported, there are a number of provisions included in the Governor's proposed budget that could have a substantial impact on the Department's budget over the next several years. At this time, there is insufficient information to quantify the cost impact of the Governor's budget proposal. Additionally, the State is seeking a Medicaid 1115 Waiver under which it would restructure the California Medi-Cal program. The Director of the California Medi-Cal Program has indicated that their goal is to complete the restructuring plan by May 2004 and to begin saving \$400 million per year statewide, beginning in Fiscal Year 2005-06. This restructuring, which is yet to be defined, may subsume all other federal Medicaid waivers in the State, including the SPCP Waiver, under which DHS receives its base Medi-Cal inpatient payments, SB 1732 reimbursement, and SB 1255 funds.

Finally, the President's budget proposal would cap Medicaid payments to "individual government providers" to no more than the cost of providing services to Medicare beneficiaries. If this were to occur, the impact on DHS would be subtantial. Like most public hospitals, DHS uses Medicaid funds received beyond the actual service costs to support the provision of health care services to medically uninsured and indigent patients.

The Department is working closely with the Chief Administrative Office and the County Legislative Strategist to develop a strategy for working with the State and Federal governments related to these proposals.

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Implementation of Scenario III

While much of Scenario III was implemented in Fiscal Year 2002-03, there remain several areas in which the requisite savings either have been enjoined by the Federal District Court or have not been achieved.

As noted previously, the cost associated with a one-year delay in the closure of Rancho Los Amigos National Rehabilitation Center and the 100 inpatient beds at LAC+USC Medical Center is estimated to be \$85.5 million.

The original projected savings associated with the implementation of Scenario III was \$399.5 million in Fiscal Year 2007-08. As a result of the Federal District Court injunction, as well as savings shortfalls, the forecast savings resulting from implementation of Scenario III has been revised down from \$352.5 million, as reported in the January forecast, to \$349.7. The change from the previous forecast is the result of adjustments in the following three areas.

The first is the effect of delaying savings associated with the 16 percent efficiencies at King/Drew Medical Center from July 1 to October 1, 2004 (Item 3A on Attachment D). This three month delay will reduce the anticipated savings at the hospital in Fiscal Year 2004-05 from \$46.2 million to \$40.4 million. The Department's Finance Division is completing a financial assessment of every area of the hospital, as well as a comparison to other Harbor-UCLA Medical Center, to identify specific areas in which savings likely can be attained. This information will be utilized to develop the efficiency reductions for the coming fiscal year.

The second change in the Scenario III savings forecast is related to an adjustment in the estimated cost associated with converting High Desert Hospital to a Multi-service Ambulatory Care Center (MACC) (Item 6A on Attachment D). As a result of unanticipated staffing costs associated with this new model of care, the staffing model was revised and the estimated savings associated with the conversion of the hospital to a MACC have been reduced from \$10.3 million to \$8.5 million in Fiscal Year 2003-04.

Finally, the savings associated with the Comprehensive Health Center efficiencies (Item 9A on Attachment D) have increased from \$7.9 million to \$9.0 million as a result of increased savings at Humphrey Comprehensive Health Center.

As has been discussed previously, the Department's fiscal outlook is extremely variable. There remain a broad range of outstanding federal and state actions that

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could substantially impact the current budget shortfall over the next several years. The Department continues to work aggressively to achieve the savings included in Scenario III, as well as to identify additional savings opportunities. I will continue to keep you apprised of these activities. Please let me know if you have any questions.

TLG:ak

Attachments

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES

FISCAL OUTLOOK - 03/02/2004

(\$ IN MILLIONS BASED ON FY 03-04 SUPPLEMENTAL BUDGET RESOLUTION)

7500	1					FIS	FISCAL YEARS / COLUMNS	s/co	LUMNS						
AND AND AND PROPERTY AND	ne #	#	2002-03 / (1)	2003	2003-04 / (2)	2004	2004-05 / (3)	200	2005-06 / (4)	200	2006-07 / (5)	200	2007-08 / (6)	TO	TOTAL / (7)
Make A Control of the		Surplus/Deficit as of June 26, 2002		S	(326.6)	ss	(549.2)	S	(709.4)						
Processor States Control Indiana Section (1997)	2	Scenario III Reductions / Use of Designation Funds	*(see note)		267.8		327.8		357.5						
	က်	Original Fiscal Stabilization Revenue Request to help fund Scenario III (Not Budgetary Shortfall by FY)	*(see note)	G	(58.8)	G	(221.4)	Ø	(351.9)	69	(387.3) (A)	& €	(423.7) ^(A)	w	(1,443.1)
	4	Forecast Update **	263.9		251.1 ^(B)		167.1 (C)		57.1 ^(D)		32.6 ^(D)	6	(165.3) (0)		
	5.	Forecast Surplus/(Shortfall) (E).(F)	\$ 263.9	Ø	192.3	S	(54.3)	₩	(294.8)	()	(354.7)	S	(589.0)	s	(589.0)
	9	Beginning Fiscal Year Fund Balance	121.0 (G)	6	353.1 (H)		545.4		491.1		196.3	ļ	,		
	7.	Cumulative Year-End Fund Balance/(Shortfall) (E).(F)	\$ 384.9	s	545.4	s	491.1	\$	196.3	S	(158.4)	s	(289.0)	€\$	(589.0)
	ω.	Defer Rancho Closure (191 beds) to July 1, 2005		G	(49.5)	S	(55.7)	S	¥	S	•	₩	٠	69	(105.2)
	6	Impact to Beginning Fiscal Year Fund Balance					(49.5)		(105.2)		(105.2)		(105.2)	į.	N/A
	0.	Revised Cumulative Year-End Fund Balance/(Shortfall)	\$ 384.9	\$	495.9	\$	385.9	49	91.1	s	(263.6)	S	(694.2)	s	(694.2)
	11	Defer LAC+USC Medical Center 100 Bed Reduction to July 1, 2005	s	49	(16.1)	↔	(29.8)	69	EV.	s	Ĺ	S	ŧ	ь	(45.9)
	12.	Impact to Beginning Fiscal Year Fund Balance			1.		(16.1)		(45.9)		(45.9)		(45.9)	1	N/A
13. Revised Cumulative Year-End Fund Balance/(Shortfall)	13.		\$ 384.9	s	479.8	s	340.0	s	45.2	s	(309.5)	s	(740.1)	₩	(740.1)

NOTES TO FISCAL OUTLOOK

- The \$56.8 million of FY 02-03 service cuts are efficiencies already in the FY 02-03 budget base at this point in time and; therefore, doesn't appear on this schedule.
- Includes revenues previously shown separately (Measure B, SPCP/UPL Waiver, SB 855, and the Federal portion of the Outpatient Lawsuit Settlement), the current year's portion of which is already included in the FY 03-04 budget. These amounts are extrapolations from the original 90% Medicaid block grant request used to determine the fiscal stabilization revenues for the June 2002 DHS Strategic Plan, which only extended through FY 05-06.
 - €
 - Up to \$20.0M of the FY 03-04 SPCP/UPL dollars may require DSH flexibility to be retained.
- Reflects release of the \$96.1M trust fund reserve.
- If CBRC/FQHC is not available after June 30, 2005, CBRC revenues, net of AB 915 backfill, will decline by \$57.8M, \$60.7M, and \$63.8M for FY's 05-06, 06-07, and 07-08, respectively. Θ
- could be as high as \$198.0M. There is also a non-hospital clinic UPL, which the State has yet to compute, that could further reduce County DHS' Medicaid revenues. Further, the full realization of the Scenario III savings, future Per State DHS, CMS may "re-base" the Medicaid Upper Payment Limit (UPL) beginning FY 05-06. The impact on County DHS of this potential action is estimated to result in reductions of Medicaid revenues from FY 02-03 levels. These estimated reductions totaling \$374.6M, are \$97.6M, \$124.9M, and \$152.1M, for FYs 05-06, 06-07 and 07-08, respectively, and are not reflected in the above. When the UPL is fully implemented, the value State and Federal Budgets, accelerating healthcare inflation, and the President's Medicaid Relief Proposal create significant uncertainty regarding the Department's Fiscal Outlook.
- These amounts are potentially improved by managed care supplement and DSH flexibility proposals currently being worked on with the State and Federal governments.
 - Reflects a beginning fund balance of \$366.9M less the \$245.9M fund balance included in the FY 02-03 Supplemental Budget Resolution.
- Reflects a beginning fund balance of \$384.9M less the \$31.8M fund balance included in the FY 03-04 Supplemental Budget Resolution. E @ E

SUMMARY OF CHANGES IN THE DHS FISCAL OUTLOOK COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES

JANUARY 20, 2004 THROUGH MARCH 2, 2004

Fiscal Year / \$ In Millions

	FY 03-04	FY 04-05	FY 05-06	FY 06-07	FY 07-08	Total
(1) Revised Estimated Cumulative Year-End Fund Balance / (Shortfall) - January 20, 2004	\$ 481.5	\$ 364.7	\$ 88.1	\$ (247.3)	\$ (655.3)	\$ (655.3)
(2) Decrease vehicle license fees for FY 03-04 based on estimates received from the CAO on February 27, 2004.	(14.3)	(14.4)	(14.5)	(14.6)	(14.7)	(72.5)
(3) Increase employee benefits costs for FY 03-04 based on actuals through December 2003. Also, increase employee benefits costs for FY's 04-05 and forward based on information from the CAO effective January 1, 2004.	(8.0)	(8.0)	(6.0)	(7.1)	(10.1)	(39.2)
(4) Adjust the AB 394 Nursing Staffing Ratio Costs for the current fiscal year based on estimates provided by the hospitals on February 2, 2004.	11.0	ĸ	i	i.	Ĭį.	11.0
(5) Delay the FY 04-05 planned efficiency savings at King/Drew Medical Center by three months from July 1, 2004 to October 1, 2004.	3 1	(5.8)	31	ą	9	(5.8)
(6) Adjust Clinical Resource Management costs for the current fiscal year based on estimates received on February 13, 2004.	3.1	E	i,	Ú	Ē.	3.1
(7) Adjust debt service costs based on estimates provided by the CAO on February 24, 2004.		2.4	(0.4)	(0.4)	(0.4)	1.2
(8) Change in current fiscal year operating forecast received on February 2, 2004 / Other.	6.5	2.8		2.8	2.6	17.4
(9) Forecast improvement/(reduction) roll-forward		(1.7) (2)	(24.7) (2)	(42.9) (2)	(62.2) (2)	-
(10) Revised (1) Estimated Cumulative Year-End Fund						
Balance / (Shortfall) - March 2, 2004	\$ 479.8	\$ 340.0	\$ 45.2	\$ (309.5)	\$ (740.1)	\$ (740.1)

(5)

Notes
(1) Assumes Rancho Los Amigos NRC and LAC+USC 100 beds will be closed June 30, 2005, CBRC will be extended for each year beyond FY 04-05, and the SPCP Waiver will not be

These amounts represent the cumulative change in the forecast from the prior fiscal year. For example, the (\$1.7) million in FY 04-05 is \$479.8 million - \$481.5 million from FY 03-

DHS Fiscal Outlook

Attachment A provides an update through March 2, 2004 of the Department's Fiscal Outlook. Attachment B is a high level summary of the key developments, and their fiscal impact, since our last update through January 20, 2004. The estimated cumulative shortfall through FY 07-08 has increased from \$655.3 million to \$740.1 million. In the event that any of the following three events transpire, they could cause this estimate to increase once again, as follows:

	\$ In Millions
Estimated Cumulative Year-End Fund Balance/ (Shortfall) as of March 2, 2004	\$(740.1)
Inability to Close/Transfer Rancho and Reduce LAC+USC Beds by 100 on June 30, 2005, or thereafter.	(308.2)
 Inability to Extend CBRC Revenues (or obtain FQHC approval) Beyond Current 1115 Waiver Expiration (June 30, 2005) 	(182.3)*
Federal "Re-basing" of SPCP Waiver	(<u>374.6)</u>
Potential Estimated Cumulative Year-End Fund Balance/(Shortfall) as of March 2, 2004	<u>\$(1,605.2)</u>

^{*} Estimated net loss after AB 915 backfill.

DHS, along with the CAO, County Counsel and the County's Legislative Strategist, continue to pursue preventing these three events from transpiring.

Also, as mentioned in the Department's last update, the new State administration is seeking a Federal 1115 Waiver, under which to restructure the California Medi-Cal program. The State's goal is to complete the restructuring design by May 2004 and to begin saving \$400 million per year Statewide beginning in FY 05-06. This restructuring, which is yet to be defined, may encompass the SPCP Waiver, which expires in December 2004, and could have a major impact on the Department's Fiscal Outlook.

Further, the Governor's Proposed Budget includes a large number of items, which are largely unquantifiable in terms of potential impact to us. We will continue to monitor the progress of these and advise the Board of significant developments.

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES

SCENARIO III SUMMARY (PLANNED VS. FORECAST SAVINGS) (a) FISCAL YEARS 2002-03 THROUGH 2007-08 (\$ in millions)

Line #.		Board Decision	Planned/ Implemen- tation	Status as of						S - LINE #. VS. 3S - LINE #. A.				
Line #.	A.	Date	Date	3/2/04	2002-03	2003-04	10	2004-05	VIII	2005-06	2006-07	2	007-08	
1. 1. A.	HOSPITALS Planned reduction of LAC+USC Forecast savings	10/02	05/03	Court injunction	\$ 2.000 (b)	\$ 16.100 (b) (c)		\$ 29.800 (c)		\$ 31.900 31.900	\$ 34.100 34.100	\$	36.500 36.500	(n)
2. 2. A.	Planned LAC+USC efficiencies Forecast savings	10/02	07/05		050 250	-				20.100 20.100	20.700 20.700		21.300 21.300	
3. 3. A.	Planned 16% efficiencies at MLK/D Forecast savings	06/02	05/03	07/03	2.800 (b)	20.900 20.900		46.200 40.389	(d)	61.900 61.900	63.800 63.800		65.700 65.700	
4. 4. A.	Planned closure of RLANRC or alternate governance Forecast Saving (e)	10/02 & 06/03	07/04	Court injunction	8 4 9	58.600 9.100	(m) (c)	64.800 9.100	(c)	70.400 70.400	77.400 77.400		85.000 85.000	
6.	Planned conversion of HDH to a MACC	06/02	05/03		1.400	9.800		11,100		12.500	14.100		16.000	
6. A.	Forecast Saving (e)			07/03	(b)	8.514	(b)	9.643	(f)	10.859	12.249		13.900	
7.	Planned capital cost avoidance at HDH	06/02	07/02		2.000	0.900	1920-08	1176		<u></u>	3		*	
7. A.	Forecast Saving (e)				(g)	湯	(b)	85 - 6		.5	75			
8. 8. A.	Planned restructure of psych services Forecast savings (e)	10/02	10/02	Nego- tiations ongoing	0.200 0.250	20.200 16.479	(h)	25.300 13.050		29.200 6.550	33.600 6.740		38.600 6.950	
9. 9. A.	COMPREHENSIVE HEALTH CENTERS Planned CHC efficiencies Forecast savings (e)	10/02	05/03	07/03	3.700 (b)	23.300 8.961	(b)	24.000 16.480	(f)	24.600 16.970	25.300 17.480		26.100 18.000	
10. 10. A.	<u>HEALTH CENTERS</u> <u>Northeast Area</u> Planned closure of 4 HC's Forecast savings	06/02	10/02	10/02	6.300 6.300	8.900 8.900		9.300 9.300		9.700 9.700	10.100 10.100		10.500 10.500	
11. 11 A.	Coastal Area Planned closure of 1 HC Forecast savings	06/02	10/02	10/02	1.000 1.000	1.400 1.400		1.400 1.400		1.500 1.500	1.600 1.600		1.700 1.700	
12 12. A.	Southwest Area Planned closure of 4 HC's Forecast savings (e)	06/02	10/02	10/02	12.700 7.400	18.100 12.995	(b)	18.700 13.020	(f)	19.400 13.500	20.200 14.060		21.000 14.620	
13. 13. A.	San Fernando Valley Area Planned closure of 2 HC's Forecast savings	06/02	10/02	10/02	3.200 3.200	4.500 4.500		4.700 4.700		4.800 4.800	4.900 4.900		5.000 5.000	
14.	Antelope Valley Area Planned 5% efficiency from AV/DHS Partnership	06/02	10/02	40/00	0.030	0.200		0.200		0.200	0.200		0.200	
14. A.	Forecast savings			10/02	0.030	0.200		0.200		0.200	0.200		0.200	
16. 16. A.	OTHER Planned PPP visit reductions Forecast savings	06/02	09/02	09/02	12.500 12.500	15.000 15.000		15.000 15.000		15.000 15.000	15.000 15.000		15.000 15.000	
20. 20. A.	Planned Public Health reductions Forecast savings	06/02	10/02	07/02	6.700 7.500	9.200 7.730	(b)	9.400 7.960	(f)	9.700 8.200	10.000 8.450		10.300 8.700	
21. 21. A.	Planned contract out of OMC Admin Forecast Saving (e)	06/02	05/03	Efforts ongoing	2.300 (2.300	(i) 8.000 -	(b)	8.000		8.000 8.000	8.000 8.000		8.000 8.000	
22.	Planned cost/revenue adjustments (j)	10/02	07/03	07/03	(: -)	25.700		41.600		38.600	38.600		38.600	
	SCENARIO III PLANNED SAVING	S TOTAL (k)			\$ 56,830	\$ 240.800	-	\$ 309.500	si a	\$ 357.500	\$ 377.600	\$	399.500	•
	LESS: FORECAST SAVINGS	AS OF 3/2/04			40.480 (l) 140.379		181.842	0 9	318.179	333.379	-	349.670	-
	SAVINGS SURPLUS / (SHORTFA	LL)			\$ (16.350)	\$ (100.421)		\$ (127.658)		\$ (39.321)	\$ (44.221)	\$	(49.830)	è
	LESS: COURT ORDERED EN	IOINED SAV	INGS			65.60	3	85.50	2 1		-	0		-
	ADJUSTED SAVINGS SURPLUS	(SHORTFA	LL)		\$ (16.350)	\$ (34.821)	-	\$ (42.158)	1	\$ (39.321)	\$ (44.221)	_\$_	(49.830)	į

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES

SCENARIO III SUMMARY (PLANNED VS. FORECAST SAVINGS) (a)

FISCAL YEARS 2002-03 THROUGH 2007-08 (\$ in millions)

Notes:

- (a) From projected budgets compared with FY 01-02 service level for each year.
- (b) The savings projections originally projected in FY 02-03 have been covered by the surplus from DHS' FY 02-03 operations. DHS' FY 02-03 final surplus was \$263.9 million. The savings projections originally projected in FY 03-04 are being covered with the estimated surplus from DHS' FY 03-04 operations.
- (c) Pending outcome of the litigation. This estimate will be updated when more information is available. \$9.1 million for Rancho represents the difference between \$58.6 million accelerated Rancho closure savings and \$49.5 million 191 bed FY 03-04 variable net operating cost.
- (d) Reflects a savings delay of three months in FY 2004-05.
- (e) Revised savings as of March 2, 2004.
- The revised savings amounts for FY 04-05 and forward are calculated based on the ratios between the original savings and the revised savings for FY 03-04.
- (g) The CAO has suggested that DHS utilize the savings from the DHS funded projects in order to meet the targeted savings as outlined in the Proposed Savings Plan for HDH Capital Cost Avoidance. According to the CAO, the savings from the HDH Capital Cost Avoidance is not a savings to DHS.
- (h) The CAO Supplemental Budget Resolution includes an increase in net cost of \$9.7 million for psychiatric services restructuring to reflect a revised budgeted savings amount of \$10.5 million (original budgeted savings of \$20.2 million less a \$9.7 million increase in net cost equals revised budgeted savings of \$10.5 million) for that restructuring. (DHS is only targeting a \$3.7 million reduction, original budgeted savings of \$20.2 million less a \$3.7 million increase in net cost equals revised estimated savings of \$16.5 million) in their Fiscal Outlook to reflect potential positive negotiations with DMH.
- (i) OMC is meeting the \$2.3 million target through existing one time FY 02-03 operational savings, even though the contracting out to LA Care has not happened yet.
- Cost/revenue adjustments refer to revenues generated by facilities to be closed, which can still be collected by Health Services and distributed across the system.
- (k) Excludes one-time expenses such as costs associated with layoffs, facility closure costs, and facility transition costs. Health Services has not yet completely identified or quantified these costs but proposes that they could be partially paid for with Tobacco Settlement funds.
- (I) The revised Scenario III total excludes those items that were covered by surplus/savings from DHS' FY 02-03 operations.
- (m) Although not originally in Scenario III of the June 2002 DHS Strategic Plan, the Board approved a one-year acceleration of the Rancho savings on 06/23/03.
- (n) Does not take into account the opening of the LAC+USC replacement facility on July 2007.

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